

Village of Wellington

Leave Donation Recipient Application

Recipient Name _____

Hire Date _____

Reason for Request:

A letter or medical certification from a licensed healthcare professional including documentation of the illness or injury of the employee or the immediate family member must be submitted to Human Resources. (FMLA Certification of Healthcare Provider may serve as documentation).

An employee requesting donated time must meet the following criteria:

1. Present a letter or medical certification to Human Resources from a licensed healthcare professional and include documentation of the illness or injury of the employee or the immediate family member (FMLA Certification of HealthCare provider may serve as documentation)
2. The employee cannot be receiving Workers Compensation, or other disability benefits (if combined, they are equal to or greater than regular earnings)
3. Employees requesting donated time (and who have been approved to receive it) must utilize the donations within the time period **approved** for leave per FMLA guidelines
4. Employees who earn in excess of \$75,000 annually, or who are receiving supplemental benefits (i.e. Aflac, Social Security Disability, FRS, etc.) are not eligible
5. An employee may only request and receive donations for one qualifying event within a one fiscal year period
6. All Personal Time Off and Major Illness Leave must be exhausted in order to receive donated leave
7. Employees must have one (1) year of continuous service and worked at least 1,250 hours in the preceding 12 months as a full-time Village of Wellington employee to be eligible
8. Leave time may not be utilized in excess of hours normally scheduled within a workweek
9. Employees may no longer receive donated leave time once they reach permanent disability, or upon separation from employment (whichever comes first)
10. Donated hours may not be counted as hours worked for purposes of overtime. Employees requesting leave donations must be in good standing and have no documented history of sick time abuse
11. If more than 1 employee is approved to receive a donation, the donation shall be distributed by percentage of need (based on all donated hours available per pay period)
12. Employees requesting leave donations must submit an application to the Human Resources Manager

**** Donated hours will be reported as income (for the recipient)**

Requests and/or approvals for Leave Donations (in any amount) are not guaranteed and are subject to employee participation; participation is not required or expected.

Leave Donation Recipient Applications should be forwarded to the Human Resources Manager.

Employee's Signature: _____

Date: _____

HR Department Signature: _____

Date: _____